



SIGN PERMIT APPLICATION

SECTION I: PROPERTY OWNER(S)

Name: _____

Mailing Address: _____

Phone: _____ Fax: _____

***If more than one owner, attach additional sheet with names, addresses and signatures as requested below**

SECTION II: APPLICANT INFORMATION & PRIMARY CONTACT INFORMATION

Applicant Name: _____

Affiliation with project: _____

Mailing Address: _____

Phone: _____ Fax: _____

Primary Contact Name: _____

****Note: the Primary Contact person is the only party the City will contact regarding sign permits**

Affiliation with project: _____

Phone: _____ Email: _____

SECTION III: PROPERTY

Address of Subject Property: _____

Name of Center (if applicable): _____

Current Zoning(s): _____

Total Sign Area: _____

Total Number of Signs (including menu boards): _____

Type of Illumination: _____



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Materials: _____

Adjacent to Residential Use (circle one): Yes No

SECTION IV: TYPE & AMOUNTS OF SIGNS REQUESTED (State quantity breakdown here)

_____ Freestanding _____ Wall
_____ Menu Board _____ Comprehensive Sign Package

SECTION V: SUBMITTAL REQUIREMENTS

Please provide the following:

Office

Check-in
Use Only

Applicant
Checklist

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Project narrative (scope of work proposed) |
| <input type="checkbox"/> | <input type="checkbox"/> | Three (3) 8.5" x 11" copies, <u>drawn to scale</u> , of Site Plan showing location of all proposed signage to be located on premises, including free standing monument signs (if applicable) |
| <input type="checkbox"/> | <input type="checkbox"/> | Lineal footage of leased building frontage as outlined in the total aggregate sign area in the City of Maricopa Zoning Ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | One (1) copy of the Comprehensive Sign Package/Sign Ordinance as applicable |
| <input type="checkbox"/> | <input type="checkbox"/> | Three (3) copies and one (1) colored set of each sign including: <ul style="list-style-type: none">▪ Length & width in inches of each proposed sign▪ Square footage of each proposed sign▪ Description of materials used for each proposed sign |
| <input type="checkbox"/> | <input type="checkbox"/> | Accurate building(s) elevations showing typical sign locations on buildings (if applicable) |
| <input type="checkbox"/> | <input type="checkbox"/> | Specifications and design criteria for all signage (window signs, wall signs, banners, sandwich/tents signs, monument signs, awning signs, freestanding signs, and any other proposed signage), color scheme, illumination style and type, materials allowed, and installation method |
| <input type="checkbox"/> | <input type="checkbox"/> | Describe how special design features such as logos, emblems, murals, or statuary will be integrated with the site and building architecture |



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- ☐ ☐ Property owner, landlord or authorized agent's approval
- ☐ ☐ One (1) copy of sign vendor's current business license
- ☐ ☐ Fees: see below

FEES: (includes plan review, initial inspection and one re-inspect)

Comprehensive Sign Package Design Review **\$200.00**
(for PADs, subdivisions, shopping centers, etc.)

One Sign **\$140.00**

Each Additional Sign **\$60.00**

2nd and each additional reinspection **\$50.00**

Unauthorized installation of signs **Double the normal fees**
(where work is started or proceeded with *prior to* obtaining permit)

I hereby certify that the above information is correct, and that I am authorized to file an application on said property, being either the owner or authorized agent to file on behalf of the owner. Anyone applying without authorization from the property owner(s) shall be subject to penalty under all applicable laws. I have read this Sign Permit Application and understand that if my application is not complete in all respects it will not be processed until such time as it is complete.

Signature of Applicant Print Name Date

Signature of Property Owner Print Name Date
(or authorized agent)

OFFICE USE ONLY

Case #:	Zoning Map #:	Fees:
Date of Submittal:	Accepted by:	